RSA-1 EN IOE New 07/11

INVESTMENT OPTION ELECTION FOR NEW ACCOUNTS RSA-1 DEFERRED COMPENSATION PLAN

Retirement Systems of Alabama
P. O. Box 302150 ♦ Montgomery, AL 36130-2150
334-517-7000 or 877-517-0020
www.rsa-al.gov

	Check all that a	pply: RSA-1	☐ DROP Ro	llover □ 457	Transfe	r	
Name	First		Middle/Maiden	1	ast		
			Wilder Walder	L	ası		
Address			Street or P. O. Box				
	City		Sta	ate		Zip Code	
Social Secu	urity Number		<u> </u>	Date of Birth _			
Phone Nun	nber		_		Month	Day	Year
I understand	d the following regarding this	s investment option ele	ection:				
Mv elec	ction must be made prior to t	the funds being submit	tted or transferred.				
-	ction can be made once eve	_					
	ction will remain in effect unt		on is made, but it must	remain in effect for 36	5 davs		
- Wiy Gloc	alon will romain in onooc and	ii a sabboqasiii sissiic	on to made, but it made	Tomain in oncor for oc	o dayo.		
RSA-1 Acc	COUNTS ONLY						
election or	ollowing investment option f split the percentages betwe % fixed and 65% stock.						
FIXED							
□ Inves	st % of new d	eferrals in the RSA-1	FIXED investment opt	ion.			
sтоск							
☐ Inves	st % of new d	eferrals in the RSA-1	STOCK investment op	otion.			
DROP Rol	LOVER ACCOUNTS ONLY						
election or s	ollowing investment option split the percentages betwe % fixed and 65% stock.						
FIXED							
	st% of DROP	funds in the RSA-1 D	ROP FIXED investmer	nt option.			
STOCK							
☐ Inves	st% of DROP :	funds in the RSA-1 D	ROP STOCK investme	ent option.			

Form continued on back - Notary Required

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Name		Social Security Number			
457 Transfer Account	S ONLY				
	or split the percentages betwe		You can elect to have 100% in either the fixed or stock ions – but they must add up to 100%, for example, 60%		
FIXED					
□ Invest	% of trustee-to-trustee trans	1 FIXED investment option.			
STOCK					
□ Invest	% of trustee-to-trustee trans	sfer funds in the RSA-	1 STOCK investment option.		
AUTHORIZATION					
Signature of Employee _			Date		
STATE OF	, County of				
			_, known to me to be the person who subscribed to the		
	s day of				
	Signature of	f Notary Public			
Seal	My Commis	sion Expires			